KU CENTER FOR RESEARCH, INC.
The University of Kansas

# Travel Expense Report

**January 1, 2020**

**Business Services**
**2385 Irving Hill Rd**
**Lawrence, KS 66045-7563**
**Telephone: 785-864-3441**
**Fax: 785-864-5025**
**research.ku.edu**

*This report, with the proper documentation, should be returned to the KU Center for Research, Inc. (KUCR) Business Office, Youngberg Hall* OR *to your departmental travel coordinator.* Submit within 60 days of travel.

Name: _____ Date: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email: _____ KU Employee: ☐ Yes ☐ No US Citizen: ☐ Yes ☐ No

Destination: _____ Origin: _____

Purpose: _____

Have you attached an agenda or other backup documentation to this report? Yes ☐

Were meals provided during your trip? Yes ☐ No ☐ If yes, please detail below.

| TRAVEL DATES & TIMES | |
|---|---|
| DEPARTURE | |
| Date: _____ | Time: _____ P.M. |
| RETURN | |
| Date: _____ | Time: _____ P.M. |

| EXPENSES | AMOUNT: |
|---|---|
| Airfare | |
| Hotel/Lodging | |
| Meals (per diem only) | |
| Car Rental | |
| Taxi, Fares, Tolls, Parking | |
| Mileage _____ x .575 | 0.00 |
| Registration | |
| Telephone | |
| | |
| **Total Expenses** | $0.00 |

| PROJECT | ACCT. | AMOUNT |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| **Total Assigned Amount** | | |

| ADVANCES/PAYMENTS | AMOUNT |
|---|---|
| Cash Advanced Voucher _____ | |
| Airfare Paid on Voucher _____ | |
| Registration Pd on Voucher _____ | |
| Other Support | |
| | |
| | |
| | |
| **Total Advances/Prepayments** | $0.00 |
| **Less Total Expenses** | $0.00 |
| **Balance Due Payable to KUCR** | $0.00 |
| **Balance Due Payable to Traveler** | $0.00 |

_____ _____

Traveler Signature Approval Authority Signature

Notes: _____

**Reset Form** **Print Form**

Rev January 2020